



All sections of this form must be completed. Please print clearly.

National Qualifications Framework Registration Form

Return this form to your teaching institution or your assessor. The Registration fee is \$25.00 incl GST.

NSI NUMBER: -- --

Please note that the name entered in this section will appear on your Record of Learning and certificates
Surname (family name)

First names (given names in full)

ADDRESS:

This should be your permanent address, **NOT** a temporary address used while attending a teaching institution.

Date of Birth:

Local (Providers) Student ID (if applicable):

Tick appropriate box (for statistical purposes only) Male Female

Tick box(es) next to the ethnic group(s) you feel you belong to (for statistical purposes only)

NZ European/Pakeha Tongan Chinese Asian Indian
New Zealand Maori Niuean Other Pacific Island
Samoaan Tokelauan Other
Cook Island Maori Fijian

Name of Teaching Institution / ITO:

I declare that the particulars given above are correct and authorise the New Zealand Qualifications Authority to collect information from, and/or exchange information with any Teaching Institution, Industry Training Organisation or Government Agency with which I am enrolled, or have requested enrolment or funding.

Signed Date

Teaching Institution or NZQA USE ONLY RC \$ Date